6/30/22, 12:39 PM

Division of Corporations

## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GREENBERG TRAURIG (ORLANDO)

Account Number : 103731001374 Phone : (407)418-2435 : (407)420-5909 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BAINBRIDGE AVENTURA CROSSROADS, LLC

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Help

From: Heather In

(((H220002252953)))

Page: 2 of 4

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Bainbridge Aventura Crossroads, L							
(Name of the Limit	ed Liability Comp. (A Florida Limited	inv as it now appe Liability Company	ars on our records.)				
The Articles of Organization for this Limited L. Florida document number L22000270823	iability Company	were filed on _	June 15, 2022	an	nd assi	gned	
This amendment is submitted to amend the following	owing:						
A. If amending name, <u>enter the new name φ</u>	f the limited liab	ility company	<u>here</u> :				
Bainbridge Cary Crossroads, LLC							
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the	e designation "LLC" or the	: abbreviati	on "L.I	C."	
Enter new principal offices address, if applic	able:	n/a					
(Principal office address MUST BE A STREE							
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	n/a					
B. If amending the registered agent and/or ragent and/or the new registered office addre	registered office ss here:	address on our	records, <u>enter the n</u>	ame of th	ne new 202	register	<u>:d</u>
Name of New Registered Agent:	n/a			: • <u>.                                     </u>	<u> </u>		
New Registered Office Address:				• • • •	N 30	-71 -71 -71	
		Enter F	lorida street address , Florida	· :	AH_		2.
		City		Zip	<del>टिक्</del> रीर ।	<b>\</b> .	
New Registered Agent's Signature, if changing	Registered Agent	<u>:</u>			ထိ		
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete istered agent as registered office	e performance provided for it	of my duties, and I a 1 Chapter 605, F.S. (	m familie 9r. if this	ar witi : docu	h and ment is	c

If Changing Registered Agent, Signature of New Registered Agent

To: 18506176383 Page: 3 of 4 2022-06-30 12,43;16 EDT 14076508411 From: Heather In

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member (((H22000225295 3)))

<u>Title</u>	<u>Name</u>	Address	Type of Action
n/a			
			CIRemove
			⊒Change
			□Remove
			□☐Change
			□Add
			□Remove
			☐Change
			⊡Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			Remove
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n/a			
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and a creation of the second second			
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ective date, if other than the da neffective date is listed, the date must be ter. If the date inserted in this block nument's effective date on the Depar	ate of filing:  2 specific and cannot be prior to to does not meet the applica	o date of filing or more than 9 ble statutory filing require	(optional) 0 days after (iling.) Pursuan: to 605.02 ments, this date will not be listed
cord specifies a delayed effective d s filed.	ate, but not an effective tir	ne, at 12:01 a.m. on the en	rlier of: (b) The 90th day after t
ted June 30	2022	_ ·	
ls! Jeffrey			
Si	gnature of a member or autho	rized representative of a men	ber